

Number Three 2021

Global Advocacy Diabetes

The newsletter of the Parliamentary Diabetes Global Network

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Inside this issue: Indian High Court case could reduce prices, High Tech Breaking News from NHS England, Socioeconomic Status Driving Healthcare Disparities, Sugar Tax News, and lots of Advocacy Action ideas.

Simple Idea Gets Results

A study commissioned by the Health Promotion Board of Singapore and published last year said that "a key risk factor of diabetes in Singapore is a high intake of

sugar, particularly from beverages".

"One in Three Singapore citizens at risk of diabetes", Gan Kim Yong, former Health Minister (Photo: Wikipedia)

The study was one of the outcomes following Singapore's 'War on Diabetes' campaign, launched by the Ministry of Health in 2016 amid growing concern over the high number of patients. Then Health Minister Gan Kim Yong stated that if nothing was done, one in three Singaporeans would develop diabetes.

One area of concern is the sale of high sugar content beverages in

schools. While many countries have introduced soda taxes to try and reduce sugar content in drinks or consumption through increased pricing, another, obvious approach, is being championed.

The call is for a coordinated approach by the Government, schools and parents to eliminate the sale of sugary drinks in schools.

Finding ways to compensate schools who benefit financially from the sales is a matter for Governments to assist. The benefits could be long-term, but where schools have already eliminated sugary drinks from their premises a healthier habit of drinking water to

rehydrate has been cultivated with children viewing sugary drinks as an occasional treat.

Meanwhile, Australia's leading medical body, the **Australian**



"Diabetes, obesity and poor vascular health are huge contributors to the burden on our health system." AMA President, Omar Korshid

Medical Association (AMA) has called on the Government to implement a tax on sugary

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beverages to combat obesity, diabetes and poor health.

The AMA President, Omar Khorshid, speaking to the Australian Press Club, made the case for a tax that would reduce the consumption of sugary drinks. "More than 2.4 billion litres of sugary drinks are consumed every year in Australia," he said. "That's enough to fill 960 Olympic-sized swimming pools.

According to the Australian Bureau of Statistics, an average Australian consumes 60 grams, or 14 teaspoons, of sugar every day. The AWA has proposed that the retail price of sugar-sweetened beverages should increase by 20 percent on average.

Advocacy Action: Do your schools allow the sale of sugary beverages? Could you call for research or draw in existing research to encourage a similar approach? What is the position with sugar taxes in incentives to reduce sugar content and consumption in your country? Is this an issue you could raise?

High Court Rules on Diabetes Drug Patent

The cost for treating diabetes is expected to come down with a Delhi High Court having dismissed an appeal by AstraZeneca, which had sought the restraining of the generic versions of a blockbuster drua.

The global pharma firm was also suing a host of domestic companies for the infringement of patents covering the drug. The High Court order paves the way for more affordable versions by domestic companies in India of the blockbuster anti-diabetes drug Dapagliflozin in the market.

You can read more at:
http://timesofindia.indiatimes.com/articleshow/84623779.cms?utm_source
http://timesofindia.indiatimes.com/articleshow/84623779.cms?utm_source
http://timesofindia.indiatimes.com/articleshow/84623779.cms?utm_source
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Diabetes Advances Should be Global

New diabetes technology and other

innovations have revolutionized type 2 diabetes control, but not universally.

The New York based EverydayHealth organisation have listed nine advancements that have changed diabetes treatment and management in recent years.

They include: Insulin pumps, continuous

glucose monitors, smart phone apps, new insulins and medications, but how many of these and the other advancements mentioned are available

to patients where you are?

https://www.ever ydayhealth.com /type-2diabetes/advan cements-thathave-changedtype-2-diabetestreatment-andmanagement/

Advocacy Action

– Can you use
the
advancements
listed to promote
improvements?

Is there a patient body you could work with to prioritise which of the nine is missing and should be an aim to correct?



Aussie Pollies Debate 100 years of Insulin

Australian politicians, called pollies by their media, debated 100 years of insulin on a motion proposed by MPs, Rowan Ramsey and Graham Perrett, the Co-Chairs of the Australian Parliament's Friends of Diabetes.

In the debate many issues were raised with MPs from across the country taking part.

Rowan Ramsey (right), a member of the ruling Liberal Party, referred to the world wide incidence of diabetes and



concerns that numbers continue to increase.



His Labor Party Co-Chair, Graham Perrett (left), referred to insulin as the holy grail of diabetes treatment as insulin keeps more than one million Australians alive.

You can read, watch or download the debate that took place in the Federal Parliament on 2nd June by searching

here: https://www.aph.gov.au/

Advocacy Action: The motion, right, could be used as a template and adapted for other countries. How are you marking 100 years of insulin in your Parliament? Could you use a campaign on this to gain more advocates?

This House: (1) notes that:

(a) 2021 marks 100 years since the discovery of insulin by Canadian surgeon Frederick Banting;

(b) Frederick Banting along with his colleagues Professor John McLeod, medical student Charles Best and researcher Dr James Collip, solved the problem of how extracted insulin could be used to treat a person with diabetes;

(c) insulin was first administered to a 14 year old boy, Leonard Thompson at the Toronto General Hospital—it was lifesaving for Leonard and for millions of others diagnosed with diabetes over the ensuing years; and (d) for their discovery, Banting and McLeod won the Nobel Prize in Physiology and Medicine in 1923 and shared their prize money with Best and Collip; (2) recognises that:

(a) diabetes is a serious and complex metabolic disease that affects the lives of many Australians;

(b) more than 1.4 million Australians currently have diabetes and are registered with the National Diabetes Services Scheme (NDSS); and

(c) Australians like Anna Moresby, who was diagnosed with type 1 diabetes as a child during World War 2, can live long and productive lives because of the discovery of insulin—Anna has just received a Kellion Victory Medal for living with diabetes for 80 years; and

(3) acknowledges that:

(a) the Government has a long-standing commitment to the NDSS, established in 1987, which assists people with diabetes to self-manage their diabetes through provision of subsidised insulin pen needles and pump consumables, glucose monitoring strips, continuous glucose monitors and flash monitors, and important information, resources, education and support programs and other services; (b) there has been strong bi-partisan support for the NDSS: and

(c) since its inception the NDSS supports all people with diabetes all over Australia, including children with type 1 diabetes and families, young adults, women with diabetes in pregnancy and over 450,000 people who currently use insulin to help manage their diabetes.

The cross party 'Friends of Diabetes' group in the Australian Parliament is one of many such groups in Parliaments around the world. Could we help yours to be even more effective, or help you to grow your membership. We can liaise with you to arrange an on-line meeting to encourage new members who advise on campaign and advocacy ideas. Do ask your colleagues to join, is free and only takes a couple of minutes to fill in a form on-line at www.pdgn.co.uk – To contact PDGN, email info@pdgn.co.uk

Artificial Pancreas for NHS Patients

NHS England and NHS Improvement has recently announced plans for a new drive to revolutionise the lives of people with Type 1 diabetes, through provision of state-of-the-art artificial pancreas technology, 100 years after the discovery of insulin.

Hybrid closed-loop (HCL) insulin delivery systems automatically balance blood sugar levels by constantly measuring glucose and delivering insulin directly to the bloodstream when needed. Up to 1,000 new patients will benefit from a pilot of the innovative 'closed loop technology', which continually monitors blood glucose and automatically adjusts the amount of insulin given through a pump.

Selected specialist diabetes centres in England will test the rollout of this technology initially, with data submitted via the NHS's world-leading National Diabetes Audit to enable the results to feed into an evidence assessment undertaken by the National Institute for Health and Care Excellence (NICE).

NICE will then, through their usual guideline development process, consider the evidence including this real-world data for use of HCL, and if appropriate make recommendations for its use across the NHS.

Participants will be selected according to specific eligibility criteria developed in conjunction with the Association of British Clinical Diabetologists (ABCD), meaning the opportunity is to be targeted at those most set to benefit.

The commencement of this new drive to provide hybrid closed loop technology means that the NHS is going above and beyond its existing ambition in its Long-Term Plan to make other forms of non-invasive glucose monitoring technology available to 20 percent of those with Type 1 diabetes and to all pregnant women with Type 1 diabetes.

Monitoring patches worn on the skin allow patients to scan a sensor to get a reading to observe changes to their blood glucose levels over time, allowing a more holistic

understanding of their personal glycaemic control and supporting enhanced self-management.

Two in five people with Type 1 diabetes are already now benefiting from such patches, which far exceeds the original target. In addition, maternity services across the country are now offering continuous glucose monitors to expectant mothers, supporting them to achieve better outcomes in pregnancy and for their babies.

Professor Jonathan Valabhji OBE, National Clinical Director for Diabetes and Obesity, said:

"In a year that marks a century since insulin was discovered which revolutionised



the world of diabetes – the deployment of this innovation for the benefit of so many people is a prime example of the NHS's continued progress in modern medicine and technology and shows the NHS commitment to providing world class care for those living with diabetes'.



Professor Partha Kar OBE, NHS National Speciality Advisor for Diabetes, said:

"One hundred years after the discovery of insulin, the 'artificial

pancreas' is a potentially revolutionary development in the treatment of diabetes.

The NHS has long been at the forefront of clinical advances in care for major diseases, including diabetes, which have allowed patients to live longer and healthier lives. This new technology is an extension of the fantastic work achieved by the NHS, third sector and industry partners who are working together to improve the lives of patients"

How Socioeconomic Status Drives Disparities in Health care

A presentation by Ananta Addala, to the virtual American Diabetes Association congress addressed how low socioeconomic status is a main driver of disparities in health care.

Ananta, a paediatric endocrinologist and physician scientist at Stanford University, California, referred to a variety of sociodemographic characteristics that feed into the disparities found in paediatric diabetes care.

She addressed the role that socioeconomic status has in those disparities and noted that previous research had



Ananta Addala believes both environmental factors and discrimination contribute to disparities in health care.

shown that minority patients often receive a lower quality of health care than their peers.

She put some of the reasons down to environmental factors and discriminations. Clinical judgement about appropriateness of care as well as patient preference have also been considered as contributing to the difference in care quality, but have

long been noted as not contributing to disparities, but Ananta believes that both do.

https://www.contemporarypediatrics.com/view/how-lowsocioeconomic-status-influences-disparities-in-diabetescare

See also the UK National Paediatric Diabetes Audit (NPDA) published by the Royal College of Paediatrics and Child Health (London, UK) with their findings that access to vital diabetes technology varied considerably by both race and ethnicity, and social deprivation status. Widening racial and social gap in diabetes'

<u> https://doi.org/10.1016/S2213-8587(21)00183-2</u>

Advocacy Action – Can you use either, or both the above, to raise the disparities and what the evidence shows is behind them in diabetes care?



Nutrition Concerns Expressed

UK Members of Parliament on a House of Commons Select Sub-Committee have welcomed a positive review of the UK foreign aid programme's work on nutrition. But they raised questions about whether those achievements can endure, particularly as the review predicted the Covid-19 pandemic would cause a "huge increase in the number of people facing hunger and malnutrition".

https://committees.parliame nt.uk/committee/98/internati onal-developmentcommittee/news/156689/ica i-sub-committee-nutritionreport-publication-21-22/

Type 2 Remission

The term "remission" should be used to describe a person with type 2 diabetes who has achieved a disease-free status.

That is according to representatives from the American Diabetes Association, the European Association for the Study of Diabetes, Diabetes UK, the Endocrine Society and the Diabetes Surgery Summit.

https://www.healio.com/news/endocrinology/20210830/remission-best-term-to-define-return-of-normal-glucose-levels-in-type-2-diabetes

News From Around the Globe



Provincial MP Calls for Better Eye Care

In the Canadian province of Ontario, New Democrat MPP, France Gelinas, is calling on the Legislative Assembly to provide better eye care for people living with diabetes in the Sudbury area.

She said retinal scans are covered by the state when performed by an ophthalmologist, but cost patients out of pocket if they are performed by an optometrist. It can cost between \$60 and \$120.



France Gelinas MPP, calling for teleophthalmology clinics for better eye

Gelinas said many low-income patients with diabetes have reached out to her saying they have passed on these exams because they simply can't afford them. She said wait times can be up to six months to see an ophthalmologist in the area she represents.

"Either make it that the optometrist can do the scan and bill the government so that the person doesn't have to pay," said France Gelinas. "Or bring one of those -- they are called teleophthalmology clinics -- bring one of those clinics to Sudbury. We have a very high rate of people with diabetes in our region."

Advocacy Action – Does your government or legislative assembly meet the cost of eye tests for low-income patients? Would a mobile teleophthalmology clinic help? Do you have an eye screening programme to identify problems early on? PDGN has examples of screening programmes.

NCD's Hit Kenyan Incomes



According to Mutahi Kagwe, Kenya's cabinet secretary for the Ministry of Health, rising cases of cancers, diabetes, epilepsy and sickle cell disease, known as noncommunicable diseases (NCDs), particularly in young people are contributing to a decrease of a third in Kenyan household incomes.

In July this year, the country embarked on a five-year national strategic plan to reduce NCDs with the aim of reducing premature deaths by a third.

The plan recommends strengthening and widening public-private partnerships to combat NCDs, using community-based interventions such as screening at community level for



early diagnosis and training community health volunteers to sensitize people on dangers of risk factors such as alcoholism and tobacco use, and establishing a national regulatory framework to promote healthy diets.

Advocacy Action – Do you have a strategy or plan for reducing NCDs? Would target setting help?

Photo credit: Unsplash/CC0 Public Domain

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More News From Around the Globe

Cross Aisle Support for Action

According to the US Centres for Disease Control and Prevention, about 41 percent of adults aged 60 and over had obesity in the period of 2015 through 2016, representing more than 27 million people, while the National Institutes of Health has reported that obesity and overweight are now the second leading cause of death nationally, with an estimated 300,000 deaths a year.



This has led to Congressman Ron Kind to work cross-party with three other Congressmen, Tom Reed, Raul Ruiz and Bred Wenstrup, in support of the Treat and Reduce Obesity Act (TROA) and the Ensurina Access to Lower-Cost

Medicines for Seniors Act.

They are hoping more members of Congress can be encouraged to support the legislation.

The TROA would expand Medicare coverage of behavioural therapy for obesity and prescription drug offerings for the treatment of obesity or for weight loss management, while the Ensuring Access to Lower-Cost Medicines for Seniors Act would require prescription drug plan sponsors in Medicare to cover generic drugs and biosimilars in their formularies and establish lower cost-sharing tiers. It would also prohibit them from instituting prior authorization requirements.

Advocacy Action: Can you use what is happening in the States and propose something appropriate within your healthcare system?

Covid-19: Fears over sharp rise in diabetes in India



A BBC report quotes Dr Rahul Baxi, a Mumbai based diabetologist saying: "The worry is that Covid-19 could trigger a tsunami of diabetes in India after the pandemic is over."

He said 8-10% of his patients with no history of diabetes who contracted Covid-19 continued to have high sugar levels months after recovery and were on medication.

"Some have borderline diabetes. Others are managing with medicines even a year after recovery," he said.

Doctors around the world are debating whether Covid-19 itself is causing diabetes in patients with no previous history.

https://www.bbc.co.uk/news/world-asia-india-58066767

High Burden of Undiagnosed or Poorly Controlled NCDs



A comprehensive health-screening program in rural northern KwaZulu-Natal, South Africa, has found a high burden of undiagnosed or poorly controlled non-communicable diseases, according to a study published in *The Lancet Global Health*.

Researchers found that four out of five women over the age of 30 were living

Continued on next page

News For You From Around the Globe

Continued from previous page.

with a chronic health condition, and that the HIV-negative population and older people -- especially those over 50 -- bore the higher burden of undiagnosed or poorly controlled non-communicable diseases such as diabetes and hypertension.

https://www.news-

medical.net/news/20210621/New-programreveals-high-burden-of-undiagnosed-orpoorly-controlled-diseases-in-rural-South-Africa.aspx



Diabetes epidemic continues to rise in India

The All-India Institute of Medical Sciences (AllMS) is calling for prompt action to reverse the growing numbers of people with diabetes in the country. Diabetes in India has assumed epidemic proportions and there are now more than 77 million people in the country with the condition.

The International Diabetes Federation (IDF), India, says that, with more than 77 million diabetics, the country now has the second highest number of people suffering from this chronic metabolic condition in the world.

Highlighting the importance of taking action now, Dr Sanjeev Mishra, Director, All India Institute of Medical Sciences, Jodhpur, says, that by 2045, this number will double if prompt action is not taken.

PHOTO Dr Sanjeev Mishra calls for prompt action.

At least 134 million Indians will have diabetes by 2045 and the well-being of our people will take a major hit. It cannot be ignored that the shift in the disease pattern since 1990 can be correlated with the increase in consumption of processed food.

The rapid rise in diabetes across socioeconomic categories and age groups has been fuelled by a massive alteration in the dietary habits of Indians. If we want to control the diabetes epidemic, we have to act now," he said.

Have You Got News For Us!

Please let us know what's happening in your part of the world, to share your successes and even failures, to help others with the same objectives to reduce the numbers of people with diabetes, encourage early diagnosis and campaign for the best treatments.

Get in touch with info@pdgn.co.uk

Diabetes Health Priority in Kerala

Health and Family Welfare Minister, Veena George, has stated that Kerala is working towards combating lifestyle diseases with the focus on diabetes which is on the rise in the state. She put the rise down to insufficient physical exercise and altered food habits causing an increase in blood sugar levels among the people of Kerala.



Veena George: "Curbing diabetes requires a change in public consciousness and conviction."

Advocacy Action – Is there similar growth, and for similar reasons in your country? Are there any initiatives, plans or campaigns you are or could be promoting? Could more be done to raise the profile of the issue inside and outside of your Parliament/Assembly?

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News in Brief

US Screening Age Lowered

The U.S. Preventive Services Task Force (USPSTF) has lowered its recommended Type 2 diabetes screening age for overweight and obese adults.

What sat at 40 years of age has now been lowered to age 35.

The change is reflective of evidence published in the Journal of the American Medical Association (JAMA) that signals an increase in prevalence of Type 2 diabetes across all age groups and the growing burden of chronic health conditions.

The Future is Automation

According to *Medgadget*, a web publication produced by 'Coherent Market Insights', the healthcare industry is rapidly adopting new technologies such as Artificial Intelligence (AI), robotics, medical imaging analytics; and extracting maximum benefits to drive down operational efficiencies, reduce cost of care, and enhance quality of care.

Healthcare automation applications are assisting healthcare professionals and hospital administrators in conducting daily activities seamlessly and treating and managing patient care more efficiently.

For instance, according to a study conducted by researchers from the Indiana University, USA, in 2014, utilization of AI for deciding the course of treatment by doctors has increased by 50 percent while health care costs had reduced significantly.

https://www.medgadget.com/2021/06/late st-research-of-healthcare-automationmarket-how-automation-is-key-to-thefuture-of-healthcare-operations.html

DKA Link to COVID in Young Type 1's

Diabetic ketoacidosis (DKA) events increased among youths with type 1 diabetes in the U.S. and other countries hit hard by the first wave of the COVID-19 pandemic, according to a study published in *Diabetes Technology and Therapeutics*.

DKA is a serious problem that can happen in people with diabetes if their body starts to run out of insulin. When this happens, harmful substances called ketones build up in the body, which can be lifethreatening if it's not found and treated quickly.

DKA mainly affects people with type 1 diabetes, but can sometimes affect people with type 2 diabetes.

https://www.healio.com/news/endocrinology/20210621/dka-rates-rise-for-youths-with-type-1-diabetes-in-countries-with-higher-covid19-mortality

Global Walk for Diabetes

The World Diabetes Foundation is promoting organised walks around World Diabetes Day that falls each year on 14th November.

The Foundation has produced comprehensive guides in numerous languages to help people organise one.

Advocacy Action: Could you organise a walk among Parliamentarians? Your national diabetes association might be willing to help with the organisational leg work (no pun intended), why not contact them to see?

More details here: https://www.worlddiabetesfoundation.org/ global-diabetes-walk-2021

Nutrition News

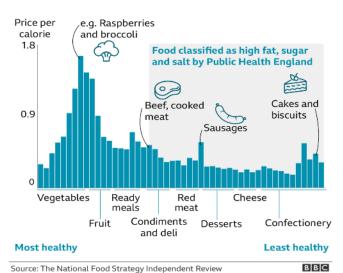


UK Told Tax Sugar and Salt -Prescribe Veg

Sugar and salt should be taxed and vegetables prescribed by the NHS, an independent review of the food we eat has suggested.

The report, led by businessman Henry Dimbleby, said taxes raised could extend free school meal provision and support better diets among the poorest.

Healthy food tends to cost more per calorie



England's National Food Strategy (Scotland, Wales and Northern Ireland have devolved health responsibilities) also wants GPs to try prescribing fruit and vegetables to encourage healthy eating.

https://www.bbc.co.uk/news/uk-57838103



In 2017 a survey of 4,000 elementary students in Majuro, capital of the Marshall Islands, found that 10 percent of fee-paying school students and 25 percent of state school students were overweight, and 85 percent of them ate vegetables 5 or fewer days a week.

The Marshall Islands 60,000 inhabitants live spread out over 29 coral atolls in the Pacific Ocean and live on a diet described as "ripe for diabetes."

Dietician Brenda Davis, of the CWC's (Canvasback Wellness Centre) Diabetes Wellness Program told the World Diabetes Foundation that with: "children indulging in popsicles and soda or eating ramen noodles with Kool-Aid powder sprinkled on top for breakfast and families dining on white rice, meat, and sweet beverages for lunch and dinner every day. "It would be difficult to design a diet that could more efficiently induce type 2 diabetes than the one Marshallese people have adopted."

In partnership with Canvasbeck Missions, a faith-based organisation, the CWC has been running an education programme in lifestyle diseases, to reduce the incidence of diabetes and other poor health

WDF first met Canvasb ack Missions, the faithbased organisa tion that jointly runs the CWC with



Women promoting healthy eating in the Marshall Islands
Photo credit: European Commission

several Marshallese ministries, about a decade ago. Those involved hope this programme will reach other nations and help influence their health programs. For more information, see the project description on WDF's website.

https://www.worlddiabetesfoundation.org/news/challenging-food-culture-marshall-islands

More Nutrician News

Millet Based Diet Lowers Type 2 Risks

A recent article in the Times of India quotes research suggesting the cereal, millet, is effective in preventing diabetes or improving control of the condition.



Read more here:

https://timesofindia.indiatimes.com/city/hyderabad/mille t-based-diet-lowers-risk-of-type-2-diabetes-saysicrisat/articleshow/84875531.cms

Benefits of two Servings of Fruit a Day

People who consumed two servings of fruit per day had a 36 percent lower risk of developing type 2 diabetes within five years, according to a study published in June in the Endocrine Society's *Journal of Clinical Endocrinology & Metabolism*. That's in contrast to those who consumed less than half a serving of fruit each day.

https://www.everydayhealth.com/type-2-diabetes/eating-two-servings-of-fruit-a-day-cuts-type-2-diabetes-risk-study-suggests/

Green Tea & Coffee Can Save Lives

A new study has found that drinking green tea can be a lifesaver, especially for people with diabetics. The study reveals that drinking four or more cups of green tea



along with two cups of coffee (or more) can lower the risk of death among people with the condition by 63 percent. The study also found that it wasn't the caffeine that was the active ingredient that made the results so striking. Rather, the antioxidants in the tea, combined

with coffee throughout the day.

The researchers also found that drinking just green tea alone, or just coffee alone has beneficial effects, but the combination of drinking both daily reduces the risk of death even further.

https://thebeet.com/new-study-links-green-tea-and-coffee-to-lower-deaths-in-diabetics/

Technology Corner



Roche Diabetes Care have launched the mySugr Pump

Control in Switzerland. It is a new module within the mySugr app designed to enable people with diabetes to control an insulin pump directly via a smartphone. Availability in further European countries is likely to follow.

https://www.prnewswire.co.uk/news-releases/roche-launches-mysugr-pump-control-within-the-mysugr-app-to-simplify-insulin-pump-therapy-via-smartphone-878207237.html

Afon Technology -Images have been released of a wearable non-invasive blood glucose sensor.



https://www.med-

technews.com/news/Digital-in-Healthcare-News/imagesreleased-of-world-s-first-wearablenon-invasive-blood/

Researchers from the University of Cambridge and Inselspital (University Hospital of Bern), Switzerland, have developed an artificial pancreas and smartphone app that could



revolutionise type 2 diabetes treatment.

A wearable 'pancreas' that connects to a

patient's smartphone, using an algorithm to monitor blood glucose levels and automatically give insulin as needed.

https://www.healtheuropa.eu/artific ial-pancreas-trialled-in-type-2diabetes-patients/110399/

Sugar Tax News



Pakistan Sugar Tax Rise Proposed

Pakistan's Ministry of National Health Services, Regulations and Coordination has recommended the Finance Ministry should raise the taxes on Sugar-Sweetened Beverages (SSB's) including carbonated drinks in the coming budget to make them less affordable because of their health hazards.

The Special Assistant to the Prime Minister on Health, Dr Faisal Sultan, has sent a recommendation to the finance minister to raise taxes on sugar-sweetened beverages on a request from health experts, especially eminent diabetologists in the country.

The World Health Organisation and the World Bank have recommended increasing taxes on SSBs to reduce obesity and related diseases like diabetes.

Even though Pakistan has low taxes on SSBs in comparison to other countries in the region like India, the Maldives and

countries like Saudi Arabia, Qatar and Bahrain, there is no guarantee the Finance Ministry will act on the recommendation unless MPs lobby the Minister in numbers.

Nigerian Campaign for a 20 percent tax on Sugary Drinks



A coalition of non-governmental organisations, has urged the Nigerian Federal and State governments to place a 20 percent tax on sugary drinks and sugar-sweetened beverages in the country.

The coalition warned that the lack of excise duties on sugar-sweetened beverages could lead to a spike in the already worsening occurrences of diabetes, obesity, tooth decay, cancer and stroke among the population.

Members of Parliament at both State and Regional level are being urged to act.

https://dailytrust.com/coalition-moves-for-20-tax-on-sugary-drinks

Research Corner



Japan - A new study led by researchers at Shimane University has found small but significantly increased risks of diabetes and sarcopenia, which is loss of muscle and weakness due to aging, among older adults with oral frailty.

https://www.medicalnewstoday.com/articles/poor-oral-health-linked-to-muscle-loss-and-diabetes

Germany – Ten-year study into symptoms of depression in people with diabetes and more importantly for this work, previously undetected diabetes.



https://www.dovepress.com/high-depressive-symptoms-in-previously-undetected-diabetes--10-year-fo-peer-reviewed-fulltext-article-CLEP



USA - Results of two studies indicate that real-time continuous glucose monitoring (CGM) benefits for people with type 1 or type 2 diabetes on a range of insulin regimens and from a wide variety of backgrounds.

https://www.medwirenews.com/diabetes/studies-support-wider-cgm-access-in-type-2-diabetes/19221536

Associations' News

News from Associate Members of PDGN – national diabetes associations and other not-for-profits



'Less Talk, More Action'

The US Diabetes Leadership Council has launched a 'Less Talk, More Action' media campaign on rebate reform. The rebate system is fuelling the prescription drug pricing crisis. DLC believe that patients should never pay more for a covered product or service than their health plan pays. While some states have begun to address the issue, action on the federal level is crucial for patients and families across the country. Targeted at Congress, they have created their new website to go along with the campaign. Check out their new website by clicking on the link below. https://diabetesleadership.org/?eType=Em ailBlastContent&eld=c6afc951-c284-4ce7b0e3-9574b15fdffd

"Heads Up on Diabetes"

Diabetes Australia (DA) is in the second year of a three year "Heads Up on

WOULD
YOU MIND
BEING JUDGED
EVERY TIME
YOU EAT?

Meriem minds.
People with diabetes can
choose what to eat.

END DIABETES BLAME & SHAME

HEADSUP ON DIABETES & STIGMA Weekedsupdishetes.com.au

Diabetes" campaign and this year is focusing on diabetesrelated stigma.

Their research indicates as many as 4 out of 5 people with diabetes have experienced feelings of blame or shame as a result of living with the condition, so this

year they wanted to ask Australians to ask themselves would they mind being treated

the way people with diabetes are treated.

A series of graphics have been produced and here's two of them that demonstrate the messages DA is trying to communicate.



Dance for Diabetes

DA has also been active in encouraging people to participate in socially distant dance classes and raise funds for diabetes



research. The launch for Dance4Diabetes was held at Brisbane's Mt Coot-tha, a scenic spot and city icon.

Dance4Diabetes encourages people to Donate, Dance and Dare to support diabetes research. You can find out more at https://dance4diabetes.org.au

'Going Green'

The Bermuda Diabetes Association (BDA) is going green. Debbie Jones reports that they are getting rid of their pharmacy bags

and replacing them with bags made from recyclable materials.



The BDA is also looking to replace all of the current medicine bottles which are made from toxic plastic with medicine bottles that are 100% biodegradable. "As we turn the fabric of our Association and pharmacy green, we hope to demonstrate that being green is important in the same way being healthy is important."

Debbie added: "The BDA is honoured to be part of the Global Parliamentarians and share in the vision for a world where people with diabetes have access to the best care possible".

Advocacy Tips

If you are a diabetes advocate - or would like to become one - understanding patient priorities is important. You can learn more from #docday°. Follow this link https://dedoc.org/docday to this year's event and the welcome video from Bastian Hauck.

PDGN NEWS

Can We Help You Form a Group?

If you can persuade a few colleagues to join PDGN – it's free and only takes a couple of minutes to fill in a form on-line at www.pdgn.co.uk – we can liaise with you to arrange an on-line meeting and put you in touch with someone who can help you get your group off the ground.

PDGN Needs You

Could you take on a role within the global network to help us to reach out and grow our membership and effectiveness in meeting the challenge of diabetes across the world?

You will already be an advocate for the prevention, early diagnosis and best treatments for diabetes within your country. Could you become a global champion alongside our vice-presidents and help shape our strategy and activities?

For an informal chat about what's required contact our Secretary General, Adrian Sanders, adrian@pdan.co.uk

Global Advocacy News

Global Advocacy News is the newsletter for members and friends of PDGN, the Parliamentarians for Diabetes Global Network. Our primary objective is to enable law-makers to help prevent diabetes, encourage early diagnosis of diabetes and improve the treatment of diabetes in every part of the world. We exist to help advocates for diabetes and its comorbidities wherever they are.

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